

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	CLASS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	12W	31	11/27
FORMALITY REVIEW		100611	1-21-0
RESPONSE FORMALITY REVIEW	4	45	12/31/0

INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numbers) Canceled  
☐ Restricted  
☐ N Non-elected  
☐ I Interference  
☐ A Appeal  
☐ O Objected

BEST AVAILABLE COPY

1024  
12-5-02

Claim	Date	Claim	Date	Claim	Date
1	11/27/0	1		1	
2	11/27/0	2		2	
3	11/27/0	3		3	
4	11/27/0	4		4	
5	11/27/0	5		5	
6	11/27/0	6		6	
7	11/27/0	7		7	
8	11/27/0	8		8	
9	11/27/0	9		9	
10	11/27/0	10		10	
11	11/27/0	11		11	
12	11/27/0	12		12	
13	11/27/0	13		13	
14	11/27/0	14		14	
15	11/27/0	15		15	
16	11/27/0	16		16	
17	11/27/0	17		17	
18	11/27/0	18		18	
19	11/27/0	19		19	
20	11/27/0	20		20	
21	11/27/0	21		21	
22	11/27/0	22		22	
23	11/27/0	23		23	
24	11/27/0	24		24	
25	11/27/0	25		25	
26	11/27/0	26		26	
27	11/27/0	27		27	
28	11/27/0	28		28	
29	11/27/0	29		29	
30	11/27/0	30		30	
31	11/27/0	31		31	
32	11/27/0	32		32	
33	11/27/0	33		33	
34	11/27/0	34		34	
35	11/27/0	35		35	
36	11/27/0	36		36	
37	11/27/0	37		37	
38	11/27/0	38		38	
39	11/27/0	39		39	
40	11/27/0	40		40	
41	11/27/0	41		41	
42	11/27/0	42		42	
43	11/27/0	43		43	
44	11/27/0	44		44	
45	11/27/0	45		45	
46	11/27/0	46		46	
47	11/27/0	47		47	
48	11/27/0	48		48	
49	11/27/0	49		49	
50	11/27/0	50		50	

If more than 150 claims or 10 actions  
staple additional sheet here

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